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FACSIMILE COVER SHEET

TO: Examiner J. Stephens
Group Art Unit 2853

FROM: Michael K. O'Neill

RE: U.S. Application No. 10/615,985
Atty. Docket No.: 00862.003003.2

FAX NO.: (703) 872-9306

DATE: December 21, 2004

NO. OF PAGES: 12
(including cover page)

TIME: 4:07

SENT BY: *Harmon*

MESSAGE

Attached is an Amendment in response to the Office Action dated September 22, 2004.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

December 21, 2004
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Michael K. O'Neill, Reg. No. 32,622
(Name of Attorney for Applicant)

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In re Application of:

Docket No. 00862.003003.2

OSAMU MORITA, et al.

Application No.: 10/615,985

Examiner: J. Stephens

Filed: July 10, 2003

Group Art Unit: 2853

For: LIQUID CONTAINER CARTRIDGE INCLUDING
LIQUID CONTAINER, PRINTING APPARATUS
USING CARTRIDGE AND LIQUID-DISCHARGE
PRINTING APPARATUS

Date: December 21, 2004

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 7 | MINUS | ** 20 | = 0 | x \$25 \$50 | - 0 - |
| INDEP. CLAIMS | * 3 | MINUS | *** 3 | = 0 | x \$100 \$200 | - 0 - |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--- | | | | | | - 0 - |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

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(Name of Attorney for Applicant)

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$ _____ is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Michael K. O'Neill
Registration No.: 32,622

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